

FAIRFAX COUNTY CIRCUIT COURT CRIMINAL PRO-SE MOTIONS INSTRUCTIONS

I. Mandatory Use of Pro-Se Notice/Motion Form

With the exception of Motions to Rehear and Motions for Reconsideration, all motions filed in the Criminal Division of the Circuit Court, by pro-se defendants, must be filed along with the Court's *Pro-se Notice/Motion form*. All pro-se motions are heard on Friday's and must be noticed for the 9:00 a.m. Criminal Docket.

II. Filing Instructions and Deadlines

The Court's *Pro-Se Notice/Motion form* must be filed in the Criminal Division of the Circuit Court, Clerk's office **no later than** 4:00 p.m. on the Friday before the scheduled hearing date. A copy of the motion must also be received by the prosecuting attorney's office by this 4:00 p.m. deadline as well.

III. Motion for a Restricted Drivers License

In addition to the above procedures, all motions for a restricted drivers license **must** include a **completed** *Restricted License Information Sheet* attached to the *Pro-Se Notice/Motion form*. It is also a requirement that a copy of the defendants current DMV report be filed.

IV. Motion to Rehear a Case or Reconsider a Sentence

These type motions are **not** set on the Friday motions docket. Your motion will be forwarded to the appropriate judge to determine whether an actual hearing is necessary. If a hearing is required, you will be contacted by telephone as to the date of the hearing. Should your motion be denied without a hearing you will be notified by mail. If you have not received a response from the Court within one (1) week, contact the clerk's office at (703) 691-7320 (press 3, then 2) to determine the status of your motion.

VIRGINIA:

IN THE CIRCUIT COURT OF FAIRFAX COUNTY

COMMONWEALTH OF VIRGINIA

VERSUS

(Defendant Name)

CASE NUMBER: _____

PRO-SE NOTICE/MOTION FORM

Please take notice that on **FRIDAY** the _____ day of _____, _____, at 9:00 a.m., the above named defendant requests a hearing for:

___ Motion for Court Appointed Attorney

___ Motion for Restricted License*

___ Other: _____

(Defendant's Signature)

Please **print** the following information for use by the Court:

Current mailing address: _____

Daytime Telephone Number: _____

I hereby certify that a true copy of the foregoing was ___ Hand delivered ___ Mailed this _____ day of _____, _____ to:

___ Office of the Commonwealth
Room 123
4110 Chain Bridge Road
Fairfax, Virginia 22030

___ City of Fairfax Attorney
4201 Annandale Road
Annandale, Virginia 22003

___ Herndon Town Attorney
2200 Wilson Boulevard
Arlington, Virginia 22201

___ Town of Vienna Attorney
c/o Clerk, Town of Vienna
127 Center Street, South
Vienna, Virginia 22180

(Defendant's Signature)

*A Restricted License Information Sheet must be attached to your motion